

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90104 023 ***150.00

DOCUMENT # P97000089800

1. Corporation Name
T T H RECORDS, INC.

Principal Place of Business
6832 HANGING MOSS ROAD
ORLANDO FL 32807

Mailing Address
6832 HANGING MOSS ROAD
ORLANDO FL 32807



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/17/1997

4. FEI Number
59-0516005

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing - Trust Fund Contribution ☐ \$5.00 - May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 729 S. Semoran Blvd.
Suite, Apt. #, etc.

2a. Mailing Address

26 729 S. Semoran Blvd.
Suite, Apt. #, etc.

City & State

23 Orlando, FL

Zip Country
24 32807 25 US

City & State

28 Orlando, FL

Zip Country
29 32807 30 US

9. Name and Address of Current Registered Agent

TORRES, HECTOR
6832 HANGING MOSS ROAD
ORLANDO FL 32807

10. Name and Address of New Registered Agent

81 Name
Hector Torres
82 Street Address (P.O. Box Number is Not Acceptable)
729 South Semoran Blvd.
83
84 City
Orlando, FL 85 Zip Code
32807

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME TD
STREET ADDRESS TORRES, HECTOR
CITY-ST-ZIP 6832 HANGING MOSS ROAD
ORLANDO FL 32807

TITLE ☐ DELETE
NAME PD
STREET ADDRESS TORRES, ANIBAL
CITY-ST-ZIP 6832 HANGING MOSS ROAD
ORLANDO FL 32807

TITLE ☐ DELETE
NAME SD
STREET ADDRESS TORRES, ANA T
CITY-ST-ZIP 6832 HANGING MOSS ROAD
ORLANDO FL 32807

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Torres, Hector
1.3 STREET ADDRESS 729 S. Semoran Blvd.
1.4 CITY-ST-ZIP Orlando, FL 32807

2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME Torres, Anibal
2.3 STREET ADDRESS 729 S. Semoran Blvd.
2.4 CITY-ST-ZIP Orlando, FL 32807

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME Torres, Ana T
3.3 STREET ADDRESS 729 S. Semoran Blvd.
3.4 CITY-ST-ZIP Orlando, FL 32807

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)